



JUDY SCHERR, CMC City Clerk 201 4th Street SE, Room 135 Rochester, MN 55904-3742 (507) 328-2900 FAX #(507) 328-2901

NAME:	Max	10	Dusek	Briggo	FAX #(507) 32
ADDRESS:	713	11ths	Struct	S.W.	
CITY, STAT	ГЕ, ZIP СС	DDE	Rochest	er, MN	55902-6330

1. What is the name of your position, title or job title?

2. Is this an employed, appointed, or elected position?

3. What is the name of the City department in which you are employed, or City board, commission or elected body on which you serve?

4. When were you hired, appointed or elected to this position?

For questions 5, 6 and 7, the word "interest" means a substantial financial interest through your ownership of stocks, bonds, notes or other securities. The word "interest" also includes an interest arising from blood, marriage or other personal relationships or close business or political association. The phrase "doing business" means engaged in any contractual relationship with the City or making application for such relationship or for any relief or benefit available from the City including, but not limited to, variance, permit, license or plat approval.

(SEE REVERSE SIDE)

Ethics Ordinance Disclosure Form Page Two

5. Please list your interests in real property within the City of Rochester, other than your homestead. Complete on a separate page if necessary.

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6. Please list any interests you have in a business doing business with the City.

NONE

7. Please list any interest you have in any business located within, or doing business in, the City.

NONE

8. List any and all employment.

Mayo Clinic, Rochaster, Seriar Business Process Potessional

I hereby certify that the above information is complete and accurate.

Date

Please mail completed and signed form to: Judy Scherr, CMC, City Clerk, City Hall, 201 4th Street SE, Room 135 Rochester, MN 55904-3742 11/27/12